DUR AUGUST 15 COVERING JULY 1 THROUGH		Lobbyist's Registration Number			
DUE FEBRUARY 15	JIN BAIRS		FOR OFFICE US Postmark Date: 1 -		
Instruction	S		ERZ		
 Print in ink or type. Fill in Regishation Number in spaces provide Complete form and return to the Board of Eth Suite 200, Baton Rouge, LA 70809 (225) 9. This form must be delivered or postmarkee This form may be faxed to (225) 922-1414. Ton the day of fax transmittal. 	d. ics, 8401 United Pl 22-1400. I by the due date.	×	10103;	15	
1. Name Steinsel E	e CUTYC First	I.	i		
2. Business Address 15 45 5 172 Street and No.	Wicia,	Uele 13	rekriting, It	NET	
Mailing Address Scotte				\$40 2000	
3. Business Phone 225 - 27 Area Code and	1 Telephone Number		<u> </u>	No.	
Total of all expenditures made Januar (Include expenditures from Schedules A and B)	y I through June	c 30: S	· <u> </u>	***	
 Total of all expenditures made July 1 (When Applicable) (Include expenditures) 			<u> 0</u>		
6. Total of all expenditures made during (Line 4 added with fine 5 should equal line 6)	calendar year:	\$	-0.7		
7. Did you make an expenditure exceedi	ng \$50 on one c	occasion for any	one legislator:		
From July 1 through June 30? From July 1 through December 31?	Yes Yes	□ No	□ NA		
If the answer to either question in Nun	aber 7 ábove is	YES, please com	plete Schedule A and attach	17	
Furm 502, Rev 8'93	200000000	., !	CANNIAL NY 60		
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LOBBYING EXPENDITURE REPORT

Lobbyist's Registration Number

8.	Did you make expenditures exceeding t	the	sum o∫ S	250 for an	y one	legislato)];			
	From January 1 through June 30? From July 1 through December 31?		Yes Yes	y y	No No	Г)	NA		
	If the answer to either question in Num	ber	8 above	is YES, pl	case (complete	Se	chedule A and attach.		
9.	 Did you expend funds for a reception, s legislature, either house, any standing of created by resolution of either house, st delegation thereof were invited during t 	oni	mittee, s ommittee	elect come of any co	nillec	, statutor	V	committee, committee		
	Yes			13°	No					
	CERTI	FIC	CATION	.OF.ACCL	IRAG	ΣΥ				
	CERTIFICATION OF ACCURACY									
	I hereby certify that the information co.	ntai	ned here	in is true £	md co	priect to t	lha	best of my knowledge,		
	information, and belief; that all reportable expenditures have been included herein; and that no									
	information required by the Lobbyist I omitted.	Disc	olosure A	Act [LSA-]	28.2	4:50 et s	eq /	.] has been defiherately		

Form 502, Rev. 5/99